

IDAHO STATE DEPARTMENT OF AGRICULTURE
WAREHOUSE CONTROL PROGRAM
2270 OLD PENITENTIARY ROAD
PO BOX 790
BOISE, ID 83701
(208) 332-8660

_____ **Application for Seed Buyer License**
_____ **Renewal of Seed Buyer License**

Amount Received _____
License No. _____

The applicant, as a condition of receiving a license, agrees to comply with and abide by the terms of Title 22, Chapter 51, Idaho Code and rules thereunder. Upon suspension, revocation or expiration of a Seed Buyer license, the licensee shall return the Seed Buyer license to the Idaho State Department of Agriculture.

1. Business name: _____

2. Principal business mailing address: _____

3. Business phone No.: _____ 4. Fax No.: _____

5. Business mailing address in Idaho: _____

6. Idaho phone No.: _____ 7. Idaho Fax No.: _____

8. The applicant is an: ☐ Individual ☐ Partnership ☐ Corporation ☐ Limited Liability Company (L.L.C.)

9. Parent company (if applicable) : _____

10. Parent company principal business mailing address: _____

11. Parent company phone No.: _____ 12. Fax No.: _____

13. Business location(s) address in Idaho: _____ **County:** _____

_____ **County:** _____

_____ **County:** _____

_____ **County:** _____

INDIVIDUAL

14. If an Individual, list name and address: _____

PARTNERSHIP

15. If a Partnership, list names and addresses of partners : _____

16. If this application is for an Individual or a Partnership, has your business or firm name been recorded with the Office of the Secretary of State?

_____ Yes

_____ No

17. If a Corporation, use the **true corporate name** as shown in your **Articles of Incorporation**.

Corporation Name: _____

18. If a Limited Liability Company, use the **Limited Liability Company (L.L.C.)** name as shown in your **Articles of Incorporation**.

Limited Liability Company: _____

CORPORATION or LIMITED LIABILITY COMPANY

19. If a Corporation or Limited Liability Company (L.L.C.), list name and business address of officers and registered agent.

President or CEO _____ address _____

Vice President _____ address _____

Secretary _____ address _____

Treasurer or CFO _____ address _____

General Manager _____ address _____

CEO _____ address _____

Registered Agent _____ address _____

20. If this application is for a Limited Liability Company (L.L.C.), has your business or firm name been recorded with the Office of the Secretary of State? _____ Yes _____ No

21. Designate the State and date the Corporation or Limited Liability Company (L.L.C) papers were filed:

_____ State _____ Date _____

22. Does the applicant currently have in effect a Seed Dealer license pursuant to Title 22, Chapter 4, Idaho Code "Pure Seed Law"? _____ Yes (License Number): _____ No

23. Does the applicant or any of the individuals named above in questions #14, #15 and # 19, currently have in effect a Seed Buyer's bond or Irrevocable Letter of Credit? _____ Yes _____ No

24. If the answer to question #23 above is yes, has a claim been ordered collected or actually been collected against the bond or Irrevocable Letter of Credit pursuant to Title 22, Chapter 51, Idaho Code? _____ Yes _____ No

25. Does the applicant or any of the individuals named above in questions #14, #15 and #19 have a current "commercial property policy" of insurance pursuant to Title 22, Chapter 51, Idaho Code, "Seed Indemnity Fund Law." _____ Yes _____ No

26. Have there been any legal judgments against the applicant's business in the past three years? If yes, provide an explanation and attach. _____ Yes _____ No

27. Has the applicant or any of the individuals named above in questions #14, #15 and #19 been convicted of a felony? _____ Yes _____ No

28. Does the applicant have any outstanding producer financial obligations? _____ Yes _____ No
If yes provide detailed amounts and attach.

29. The applicant's fiscal year ends: _____

30. Name and address of banks(s) that handle the applicant's business accounts(s). _____

By my signing below, I certify that I have thoroughly read and fully understand and will abide by the provisions of Title 22, Chapter 51, Idaho Code, and rules thereunder of the Idaho State Department of Agriculture. I further certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected and any Seed Buyer license issued to me pursuant to Title 22, Chapter 51, Idaho Code, may be canceled at any time.

Name (print): _____

Position: _____

Signature: _____

Date: _____